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PTO/SB/05 (4/98)
Approved for use through 09/30/2000. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

<p align="center">UTILITY PATENT APPLICATION TRANSMITTAL</p> <p><i>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</i></p>	Attorney Docket No. 60426-381	
	First Inventor or Application Identifier	Desai
	Title	Combined Tire Pressure Monitoring and Keyless Entry...
	Express Mail Label No.	EL 860082233 US

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ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

See MPEP chapter 600 concerning utility patent application contents.

- | | | |
|----|--|--|
| 1. | <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing) | |
| 2. | <input checked="" type="checkbox"/> Specification [Total Pages 22]
(preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | |
| 3. | <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 11] | |
| 4. | Oath or Declaration [Total Pages] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))
 (for continuation/divisional with Box 16 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u>
 Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). | |
| 5. | <input type="checkbox"/> Microfiche Computer Program (Appendix) | |
| 6. | Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies | |

* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☐ 37 C.F.R.§3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
9. ☐ English Translation Document (if applicable)
10. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
11. ☐ Preliminary Amendment
12. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
13. ☐ * Small Entity Statement(s) ☐ Statement filed in prior application, Status still proper and desired
(PTO/SB/09-12)
14. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
15. ☐
16. ☒ Other: Certificate of Express Mail

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____ / _____
Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label 024500 or ☒ Correspondence address below
(Insert Customer No. or Attach bar code label here)

Name _____

Address

City

State

Zip Code

Country

Telephone

Fax

Name (Pnnt/Type)

John M. Siragusa a

Registration No. (Attorney/Agent)

46,174

Signature

John M. Siagrose

Date _____

February 20, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$1,058.00)**Complete if Known**

Application Number	Herewith
Filing Date	Herewith
First Named Inventor	Desai
Examiner Name	Unknown
Group Art Unit	Unknown
Attorney Docket No.	60426-381

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number: 50-1482
- Deposit Account Name: Carlson, Gaskey & Olds
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27
2. ☒ **Payment Enclosed:**
- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	740.00
106 330	206 165	Design filing fee	
107 510	207 255	Plant filing fee	
108 740	208 370	Reissue filing fee	
114 160	214 80	Provisional filing fee	

SUBTOTAL (1) (\$740.00)**2. EXTRA CLAIM FEES**

Total Claims: 33 -20** = 13.00 x 18.00 = 234.00

Independent Claims: 4.00 -3** = 1 x 84.00 = 84.00

Multiple Dependent: =

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
103 18	203 9	Claims in excess of 20	
102 84	202 42	Independent claims in excess of 3	
104 280	204 140	Multiple dependent claim, if not paid	
109 84	209 42	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$318.00)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Code (\$)	Small Entity Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for ex parte reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	
116 400	216 200	Extension for reply within second month	
117 920	217 460	Extension for reply within third month	
118 1,440	218 720	Extension for reply within fourth month	
128 1,960	228 980	Extension for reply within fifth month	
119 320	219 160	Notice of Appeal	
120 320	220 160	Filing a brief in support of an appeal	
121 280	221 140	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,280	241 640	Petition to revive - unintentional	
142 1,280	242 640	Utility issue fee (or reissue)	
143 460	243 230	Design issue fee	
144 620	244 310	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Processing fee under 37 CFR 1.17(q)	
126 180	126 180	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	
179 740	279 370	Request for Continued Examination (RCE)	
169 900	169 900	Request for expedited examination of a design application	
Other fee (specify) _____			
SUBTOTAL (3)			(\$0.00)

*Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)	John M. Siragusa	Registration No. (Attorney/Agent)	46,174	Telephone	248 988-8360
Signature	<i>John M. Siragusa</i>	Date	February 20, 2002		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Desai et al.
Serial No.: Herewith
Filed: Herewith
Title: Combined Tire Pressure Monitoring and Keyless Entry
Receiver
Attorney Docket No.: 60,426-381

EXPRESS MAIL CERTIFICATE

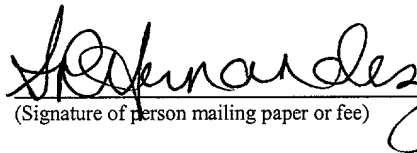
“Express Mail” Label Number: **EL 860082233 US**

Date of Deposit: February 20, 2002

I hereby certify that the attached documents or fees are being deposited with the United States Postal Service “Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the date indicated above and are addressed to “Box Patent Application, Assistant Commissioner of Patents, Washington, D.C. 20231”.

Stefanie R. Hernandez

(Typed or printed name of person mailing paper or fee)


(Signature of person mailing paper or fee)